FORM B10 (Official Form 10) (Rev. 4/98)				
United States Bankruptcy Court <u>SOUTHERN DISTRI</u> 61288, Houston TX 77208 (Houston Div	CT OF TEXAS P.O.Box ision)			
Name of Debtors	Case Number			
Stage Stores, Inc., a Delaware corporation Specialty Retailers, Inc., a Texas corporation Specialty Retailers, Inc. (NV), a Nevada corporation	00-35078-H2-11 00-35079-H2-11 00-35080-H2-11	788-42990 Creditor ID#:		
*place an "x" beside the name of the Debtor you are filing a claim against		United States Bankruptcy Court Southern District of Texas		
Name of Creditor (The person or other entity to whom the debtor owes money or property):	Check box if you are aware that anyone else a filed a proof of claim relating to your claim.			
Mçkinney Çourier Gazette *	Attach copy of statement giving particulars.	AUG 0 2 2000		
Name and address where notices should be sent:	Check box if you have never received any notices from the bankruptcy court in this case	Michael N. Milby, Clerk		
Mckinney Courier Gazette * PO Box 400 Mc Kinney TX 75070-0400	Check box if the address differs from the address on the envelope sent to you by the			
Physiolal I de Maria Mar	court.			
Account or other number by which creditor identifies debtor: $OGCOU$	Check here replaces If this claim amends a prev	iously filed claim, dated:		
1. Basis for Claim  Goods sold	Retires benefits as defined in 11 to Wages, salaries, and compensation	J.S.C. § 1114(a) on (Fill out below)		
Services performed  Money loaned	Your SS#:			
Personal injury/wrongful death	Unpaid compensation for services	репотео		
Taxes Other	from to	(date)		
2. Date debt was incurred: 4/2000 to 5/2000	3. If court judgment, date of	otalned:		
4. Total Amount of Claim at Time Case Filed: \$ _2, /94, 55  If all or part of your claim is secured or entitled to priority, also comple  Check this box if claim includes interest or other charges in additional charges.  additional charges.		Attach itemized statement of all Interest or		
5. Şecured Claim.	6. Unsecured Priority Claim	•		
Check this box if your claim is secured by collateral (including a right of setoff).	Check this box if you have an Amount entitled to priority \$	-		
Brief Description of Collateral:	Specify the priority of the clain			
Real Estate Motor Vehicle Other All personal and intangible property of Debtor's Estate	the bankruptcy petition or cessation of U.S.C. § 507(a)(3)	o \$4,300),* earned within 90 days before filing of the debtor's business, whichever is earlier - 11		
Value of Collateral: \$	personal, family, or household use - 11	nase, lease, or rental of property or services for		
Amount of arrearage and other charges <u>at time case filed</u> included in secured claim, if any \$	Taxes or penalties owed to government Other – Specify applicable paragraph of	of 11 U.S.C. § 507(e). I/98 and every 3 years thereafter with respect to		
<ul> <li>7. Credits: The amount of all payments on this claim has been credited and difference of making this proof of claim.</li> <li>8. Supporting Documents: Attach copies of supporting documents, such notes, purchase orders, invoices, itemized statements of running accounts, concourt judgments, mortgages, security agreements, and evidence of perfection DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.</li> <li>9. Date-Stamped Copy: To receive an acknowledgment of the filing of your contents.</li> </ul>	ch as promissory ntracts, of lien.	This Space is for Court Use Only		
Date  Sign and print the name and title, if any, of the creditor or of (attach copy of power of attorney, Lapy):  7 3 (00 (attach copy of power of attorney, Lapy):	ther person authorized to file this claim			

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